ISSUE SLIP STAPLE AREA (for additional cross references)

	INITIALS	ID NO.	DATE	
	MAA	1/4	2/11/94	
	1000	48	11/0/00	
	M.M. 716	28	13-00	
REVIEW -	M.M. 2168	2 9 K	4-11-60	
REVIEW	1. 14 166	29	4-1	

INDEX OF CLAIMS

,	Rejected	N	Non-elected
=	Allowed	- 1	Interference
_	(Through numeral) Canceled	Α	Appeal
_	Restricted	0	Objected

* ÷ Restricted U							
Claim	Date	Claim	Date	Claim	Date		
Final Coloriginal		Final Original		Final			
		51		101			
2		52		102	 		
3		53		103			
5 5		54		104			
16		56		106	 		
7,		57		107			
8		58		108			
9		59		109			
10		60		110			
11		61		111			
13		62		112			
13		63		113	+++++		
15		65		115			
100		66		116	+++++		
17/1		67		117			
18) k		68		118			
/ 19		69		119			
20		70		120			
21		71		121			
22		72		122			
23		73		123	 		
24	 	74 75		124	 		
25 26		76	- - - - 	125 126	+ - - - - - - - - - - 		
27		77		127	 		
28		78		128	 		
29		79		129	 		
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31		81		131			
32		82		132			
33		83		133			
 		84 85		134	+		
36	+++++	86	++++	136	 		
/ 37	 	87		137	 		
38		88		138	 		
39,		89		139			
40		90		140			
41/		91		141			
42		92		142			
43	+	93		143			
44		94		144	 		
45 0		95		145	+		
47		96		146	┼┼┼┼┼┼		
48	 	98	- 	148	┤╌┼╼╎╶╎╸ ┤╾┼╌┤		
49	++++	99	- - - - 	149	 		
50		100		150			

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)

BEST AVAILABLE COFY